

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

DEAN SHANNON FOR CITY COUNCIL CAMPAIGNIMPORTANT: Indicate type of committee you are reporting for: 4(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support State of Candidates**CANDIDATE COMMITTEES ONLY:**

Candidate Name

DEAN SHANNON

Political Party

DEMOCRAT

Office Sought

Lowell City City Council

District (If Senate or House)

NA

FORM

DR-2

(Rev. 07/2003)

DISCLOSURE
REPORT**For Office Use Only**

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

Deborah L. Knapp
SIGNATURE OF TREASURER (or person filing this report)(319) 354-3530
TELEPHONEDec. 1, 2003
DATE SIGNED**Late filed reports are subject to possible civil and criminal penalties.****SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**I AM FILING A 1401/03 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate one ☐☐ CHECK IF AMENDMENT TO REPORT DATED _____☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

11/4/03

County & Local Committees, enter County in which Election is held

JOHNSON**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)\$ 107.77**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

460.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

567.77**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

567.77

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$ - 0 -

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DEAN SHANNON FOR CITY COUNCIL CAMPAIGN

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(8), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/29/03	ID# CK#	DAVID CLARK 910 APPLEWOOD CT #1 GRAHAMVILLE, IA 52241		\$ 25.00	
10/29/03	ID# CK#	JUDY BOYD 2525 ROCHESTER AVE IOWA CITY, IA 52246		\$0.00	
10/29/03	ID# CK#	MAYNARD SCHNEIDER 208 HIGHLAND DRIVE IOWA CITY, IA 52246		20.00	
10/31/03	ID# CK#	CREIL WELT 1902 GRASLON DR. IOWA CITY, IA 52246		50.00	
10/31/03	ID# CK#	LINNEE PHILLIPS 1105 OAKES DRIVE IOWA CITY, IA 52245		100.00	
10/31/03	ID# CK#	AILEEN LIECHTY 322 BLACKHAWK DR IOWA CITY, IA 52246		100.00	
10/31/03	ID# CK#	RICHARD MCKEEN 10 LAKEVIEW DR. NE IOWA CITY, IA 52240		25.00	
10/31/03	ID# CK#	THEODORE PALHA Box 1405 IOWA CITY, IA 52244		20.00	
11/3/03	ID# CK#	ROBERT SIERK 60 ARBOR HILL CIRCLE IOWA CITY, IA 52245		30.00	
11/4	ID# CK#	A KENT BRAVERMAN 1015 OAKCREST ST. IOWA CITY, IA 52246		25.00	
SUB-TOTAL				\$ 445.00	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DEAN SHANNON FOR CITY COUNCIL CAMPAIGN

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
11/28/03	ID# CK#	UNITIZED CONTRIBUTIONS		\$ 15.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$ 15.00	
TOTAL (if last page of this schedule)				\$ 460.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DENN SHANNON FOR CITY COUNCIL CAMPAIGN

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/3/03	ID# CK# 1016	DENN SHANNON 808 NORMANDY DR JOWA CITY, IA 52246	TEE-SHIRT & SET-UP	\$ 45.60
11/3/03	ID# CK# 1017	DEBORAH KNAPP 808 NORMANDY DR JOWA CITY, IA 52246	POSTAGE & FLYER FOLDING FOR DISTRIBUTION	184.44
11/4/04	ID# CK# 1018	KEVIN SHANNON 710 CLARK ST JOWA CITY, IA 52240	PAINT + BRUSHES FOR SIGNS	38.78
11/4/04	ID# CK# 1019	DIAMOND DAVES 244 MORE HALL JOWA CITY, IA 52245	ELECTION PARTY	65.00
11/5/04	ID# CK# 1020	DENN SHANNON 808 NORMANDY DR JOWA CITY, IA 52246	TEE-SHIRT	19.92
11/7/04	ID# CK# 1021	COPY WORKS 309 2ND ST CORAVILLE, IA 52241	THANK YOU STATIONERY	27.30
11/7/04	ID# CK# 1022	US POSTMASTER 5TH + 10TH CORAVILLE, IA 52241	STAMPS	19.24
	ID# CK# 1023	DEBORAH KNAPP 808 NORMANDY DR JOWA CITY, IA 52246	POSTAGE & STAMPS	167.49
SUB-TOTAL				\$ 567.77
TOTAL (If last page of this schedule)				\$ 567.77

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(I).)